

DOCUMENT RESUME

ED 264 009

PS 015 478

TITLE The Crisis in Infant and Toddler Child Care.
INSTITUTION Ad Hoc Day Care Coalition, Washington, DC.
PUB DATE 85
NOTE 25p.
AVAILABLE FROM National Association for the Education of Young
Children, 1834 Connecticut Avenue, Washington, DC
20009 (\$2.50).
PUB TYPE Viewpoints (120)
EDRS PRICE MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS *Child Caregivers; Costs; *Day Care; *Demand
Occupations; Demography; Early Childhood Education;
Educational Objectives; *Educational Quality;
Employed Parents; Family Day Care; Government Role;
*Infants; Standards; *Toddlers
IDENTIFIERS *Program Monitoring

ABSTRACT

Unprecedented increases in the labor force participation of mothers with children below the age of 3 years, a largely unmonitored supply of out-of-home child care for infants and toddlers which has not kept up with the demand, and the potential for serious developmental damage to children who do not get adequate, individualized care in the earliest years of life have combined to produce a child care crisis for millions of infants and toddlers and their working parents in this country. This report provides information about: the changing demographics of working parents with infants; existing child care arrangements; the unmet demand for infant and toddler child care; the care infants and toddlers need; qualities of a competent caregiver for infants and toddlers; measures of quality; the regulation of quality care; the high cost of high quality care; goals for a better infant and toddler child care policy; and strategies for implementing such goals. (RH)

* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *

ED264009

PS 015478

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

X This document has been reproduced as
received from the person or organization
originating it.

☐ Minor changes have been made to improve
reproduction quality.

* Points of view or opinions stated in this docu-
ment do not necessarily represent official NIE
position or policy.

"PERMISSION TO REPRODUCE THIS
MATERIAL IN MICROFICHE ONLY
HAS BEEN GRANTED BY

Carla M. Curtis/
Nat. Black Child
Dev. Inst.

TO THE EDUCATIONAL RESOURCES
INFORMATION CENTER (ERIC)."

The Crisis in Infant and Toddler Child Care

Ad Hoc Day Care Coalition

The Crisis in Infant and Toddler Child Care

Ad Hoc Day Care Coalition

**Ad Hoc Day Care Coalition
1463 Rhode Island Avenue, N.W.
Washington, DC 20005
202-387-1281**

Cover photograph by Jerry Howard

Copyright © 1985 by the Ad Hoc Day Care Coalition, 1463 Rhode Island Avenue, N.W., Washington, DC 20005. All rights reserved. Reproduction in whole or part without written permission is strictly prohibited.

Printed in the United States of America.

The Ad Hoc Day Care Coalition consists of representatives from diverse private organizations concerned about day care programs and services available to children and families. "The Crisis in Infant and Toddler Care" is a publication of the Coalition, principally authored by Eleanor Szanton and Emily Schrag of The National Center for Clinical Infant Programs and by Lori Weinstein of The Children's Foundation. This report incorporates the suggestions of many members of the Coalition and its constituent organizations.

The following organizations share the concerns expressed in "The Crisis in Infant and Toddler Care":

American Academy of Pediatrics
American Federation of State, County, and Municipal Employees, Local 205,
District Council 1707
Association of Junior Leagues
Board of Church and Society of the United Methodist Church
California Child Care Resource and Referral Network
Child Care Action Campaign
Child Care Employee Project
Children's Defense Fund
Friends Committee on National Legislation
National Association of Counties
National Association for the Education of Young Children
National Association of Social Workers
National Black Child Development Institute
National Board of the YWCA of the United States of America
National Center for Clinical Infant Programs
National Parent Teacher Association
National Urban League
National Women's Law Center
National Women's Political Caucus
New Jersey Education Association
Project on Equal Education Rights of the National Organization of Women
The Children's Foundation
The Parent Connection
Wider Opportunities for Women
Women for Racial and Economic Equality
Women's Equity Action League

The Coalition thanks the National Association for the Education of Young Children, The National Black Child Development Institute, The National Center for Clinical Infant Programs, and The Children's Foundation, for their contributions for producing and disseminating this publication.

Table of Contents

Executive Summary	1
Current Status of Infant and Toddler Child Care	
I. Working Parents with Infants: The Changing Demographics	5
II. Child Care Arrangements	6
III. The Unmet Demand for Infant and Toddler Child Care	8
IV. The Care Infants and Toddlers Need	9
V. Qualities of a Competent Caregiver for Infants and Toddlers	10
VI. Measures of Quality	11
VII. Regulating Quality	11
1. Center-Based Care	
2. Family Day Care	
3. Training for Child Care Providers	
VIII. The Dilemma: High Quality Means High Costs in Infant and Toddler Day Care	13
Summary: Current Status	14
Goals and Strategies for Improving the Future	
IX. Goals for a Better Infant and Toddler Child Care Policy	14
X. Strategies for Implementing These Goals	15
A. Federal Action	
1. Restoring, Maintaining and Expanding Existing Programs	
a. Title XX Social Services Block Grant	
b. Child Care Food Program	
c. Dependent Care Tax Credit	
2. Supporting New Legislative Initiatives	
B. State and Local Action	
1. Ways to Expand Existing Child Care Services	
2. Ways to Support Programs That Enhance the Quality of Care	
3. Ways to Provide Support to Working Parents	
Conclusion	18
References	19

Executive Summary

The Crisis in Infant and Toddler Child Care

Why is there a crisis?

Almost 4½ million mothers of children under three years of age were currently employed or actively seeking work in 1984. The number of mothers returning to work while their babies were less than a year old increased by 95% between 1970 and 1984: at these rates, by the year 2000, four out of every five American infants under one will have a mother in the labor force.

What child care arrangements exist for these infants and toddlers?

- An estimated 40% of American working women are currently entitled to paid maternity leave, generally for only four to eight weeks and generally as part of temporary disability leave. Many women have restricted choices given their economic need to work and the inadequacy of both parental leave policies and child care support.
- In 1982, of young children in non-relative, out-of-home care, 75% of those under one year of age and about half of those under age three were cared for in another home, most commonly a family day care home. Much of family day care is unmonitored.
- Less than 6% of working mothers' infants under a year old and less than 12% of one- and two-year-olds were cared for in nursery schools or day care centers in 1982.
- Child care centers and resource and referral agencies across the country report that 75% of all calls are likely to be requests

for infant care. Many metropolitan areas have only one or two child care centers which accept infants, and these centers generally have long waiting lists.

What kind of child care do infants and toddlers need?

Because physical growth and developmental changes occur at their fastest pace in the earliest months and years of life, and because infants and toddlers are more dependent on their caregivers than even slightly older children, they need high quality care by parents and other caregivers. A competent caregiver for infants and toddlers must not only know how to provide an environment which fosters physical, social, emotional and cognitive development, but should also be able to form affectionate attachments with children and to appreciate and care for each child as an individual.

Is the quality of child care for infants and toddlers regulated?

Staff-child ratios, group size and the training of child care providers are factors that can be measured, monitored and used as the basis for governmental regulation and/or parental choice.

Nevertheless, many shortcomings exist in state regulations for day care centers serving infants and toddlers. Only an estimated 25% of the total number of family day care providers for infants and toddlers are licensed.

Although child development training for day care providers is recognized as a basic ingredient in high quality care, few resources are available to teach providers the special skills required to care for infants.

Why is child care for infants and toddlers so expensive?

The small number of infants that can be cared for by one adult makes this care substantially more costly than that of older children. Center-based infant care typically costs well over \$100 per week. While family day care is typically less expensive than center-based care, family day care providers in many communities charge as much as \$80 to \$100 for infant care.

How can care for infants and toddlers be improved?

Federal, state and community action directed at existing programs, as well as new initiatives, can help to reach fundamental goals. We need to

1. Increase the options for parental leave in the earliest months of a child's life.
2. Expand the availability of child care for infants and toddlers.
3. Increase the affordability of child care for infants and toddlers.
4. Improve the quality of child care for infants and toddlers.
5. Promote training and professional recognition of infant and toddler child care providers.
6. Encourage consumer awareness in the selection and monitoring of child care, and continuing involvement between parents and child care providers.
7. Support adequate data collection, at the national level, on child care demand, supply and costs.

THE CRISIS IN INFANT AND TODDLER CHILD CARE*

Current Status of Infant and Toddler Child Care

Unprecedented increases in the labor force participation of mothers with children below the age of three years; a largely unmonitored supply of out-of-home child care for infants and toddlers which has not kept up with the demand; and the potential for serious developmental damage to children who do not get adequate, individualized care in the earliest years of life have combined to produce a child care crisis for millions of infants and toddlers and their working parents in this country.

I. Working Parents with Infants: The Changing Demographics

Almost 4½ million mothers of children under three years were employed or actively seeking work in 1984.¹ This figure includes almost half of all mothers with an infant under a year of age. As might be expected, single mothers are more often employed than married mothers. Black mothers are more likely than white mothers to be in the paid labor force; Hispanic mothers of children under three years are least likely to be in the labor force, although their numbers may be underreported.

The number of mothers returning to work while their babies were less than a year old increased by 95% between 1970 and 1984, a higher rate of increase than for any other age group. At these rates, by the year 2000, four out of every five American infants under one year will have a mother in the labor force.

* This report uses "infants and toddlers" to mean children under age three years.

Table 1
Married Mothers' Labor Force Participation²

Age of Youngest Child	March 1970	March 1984
under age 2	1,311,000 (24.0%)	2,442,000 (46.8%)
2 years	618,000 (30.5%)	1,065,000 (53.5%)

Most mothers—65%—of children under three years are employed full-time. For divorced mothers of children in this age group, the rate of full-time employment rises to 85%.

In addition, as recently as 1982, more than 25% of all mothers of children under the age of three years who were not currently in the labor force said they would look for work if they could find adequate child care at a reasonable cost.³

II. Child Care Arrangements

A 1982 Census Bureau survey of child care arrangements of the then 3,400,000 working mothers with children under three years revealed a variety of approaches, summarized in Table 2. The survey found that of children in non-relative, out-of-home care, roughly 75% of those under one year of age and about 43% of those under age three years were being cared for in another home, most commonly a family day care home, while their mothers worked. Care in nursery schools and day care centers was the principal arrangement for less than 6% of infants less than a year old and for less than 12% of one- and two-year-olds. Fathers were the principal source of care for about 15% of all children under three years whose mothers worked; about one-fourth of these fathers, however, were themselves looking for work.⁴

Table 2
Percent Distribution of Principal Type of Child Care
Arrangement—Used by Mothers 18 to 44 Years Old for Their
Youngest Child under 3 Years⁵

Type of Principal Child Care Arrangement	Youngest Child Less Than 1 Year	Youngest Child(ren) 1 & 2 Years
In child's home:		
by father	13.9%	15.8%
by grandparent	8.9	6.3
by other relative	5.1	5.0
by non-relative	6.4	6.2
In another home:		
by grandparent	13.5	10.5
by other relative	6.2 *	7.3
by non-relative	23.0	25.2
Group Care:		
nursery school	1.7	3.2
day care center	3.6	8.5
Mother cares for child while working	9.2	8.6
Other arrangements (including self care)	—	.2
Don't know/no answer	8.6	3.3

About 15% of employed mothers with children under three years reported using more than one type of child care arrangement.

Table 3
Percent of Employed Mothers 18 to 44 Using More Than One
Type of Child Care Arrangement for Their Youngest Child
under Three Years⁵

Age of Youngest Child	# of Mothers (Total)	# Employed Mothers	Percent
Less than 1 year	1,116,000	135,000	13.9
1 and 2 years	2,284,000	384,000	16.8

In using these 1982 data to think about child care arrangements for infants and toddlers in 1985 and beyond, one must keep several trends in mind:⁶

- The availability of paid or unpaid parental leave to care for young infants might result in a very different picture of child care arrangements for children under one year of age. Only an estimated 40% of American working women are currently entitled to paid maternity leave, usually as part of temporary disability benefits and typically for only four to eight weeks. Many child development specialists and parents themselves believe that parental leaves to care for infants would be of substantial benefit to both child and parents. Accordingly, it is desirable to expand the child care options available to new parents.
- The percentage of infants in family day care appears to be increasing. During 1983 to 1984, state and local child care regulatory officials surveyed by The Children's Foundation estimated that family day care accounted for approximately 80% of all out-of-home care for infants, an increase of more than 5% over the 1982 figures. Much of this care remains unmonitored.

Some aspects of the 1982 data suggest cause for concern.

- The prevalence of multiple arrangements for very young children may deprive them of much needed continuity and stability.
- Mothers and fathers who care for their children without outside help by working different shifts may experience considerable family stress.
- Mothers who care for their own children under three years while working full-time may also be stretching their capacities to the breaking point.

III. The Unmet Demand for Infant and Toddler Child Care

The dimensions of the demand for child care for infants and toddlers suggested by the Census Bureau data are vividly illustrated by reports from child care centers and resource and referral agencies across the country.

- The Rosemont Center in Washington, D.C., one of the few center-based programs in the city which accepts infants and toddlers, has closed its waiting list for infants at 250, whereas it has virtually no waiting list for older children. It is not uncommon for only one or two child care centers in a metropolitan area to accept infants.
- The San Francisco Childcare Information and Referral Counselors report that of the 1,296 requests for day care referrals in

the final quarter of 1984, 718 (over 55%) were for children from birth to two years old (40% of that 55% of infant calls were for babies younger than seven months). There are 18- to 24-month waiting lists for subsidized infant day care slots.

- The Child Care Resource and Referral Center in Rochester, Minnesota reported in 1985 that 62% of requests for day care referrals were for children two years and under, 50% for children 16 months and under.
- The Child Care Resource and Referral Center serving greater Boston reports that 60% to 70% of requests are for children two years, 8 months and younger. Almost 40% are for child care for children 14 months and younger.
- Child Care Connections, an information and referral program in Montgomery County, Maryland, estimates that nearly 80% of all the calls which it receives are from parents looking for infant care.
- The Polk County Child Care Resources Center in Des Moines, Iowa, reports 75% of its calls are requests for infant care.

IV. The Care Infants and Toddlers Need

High quality care by parents and other caregivers is essential to the healthy development of infants and toddlers. The special need of infants and toddlers for high quality care is determined by the unique characteristics of infancy. Physical growth and developmental changes are far more rapid in infancy than in later years. The infant is more dependent than the older child on the caregiver, more vulnerable to adversity, and less able to cope actively with discomfort or stress from without or within. Therefore, beyond their need for physically healthy environments, infants need to have social interchange with adults who are not only patient and warm but who can also respond to each child's individual personality.

The Dimensions of Daily Care

Responding promptly and affectionately to a baby's need for feeding, diapering or soothing does more than provide good physical care and alleviate discomfort: this habitual responsiveness from the adult environment helps the infant learn to expect and to enjoy an orderly world.

Opportunities for Cognitive and Emotional Growth

Babies who are not yet mobile depend upon adults to introduce babies at their own pace to an array of sights, sounds, and other sensory experiences, essential to stimulating their cognitive and emotional capacities. As infants grow ready to explore their environment, they still need the emotional security conveyed by responsive, familiar and skilled caregivers to use new experiences as a foundation for learning.

Self-esteem and Socialization

Continuity of relationships with loving adults helps infants and toddlers learn to value themselves as they are valued over time and enables them to be responsive to positive guidance. Through realistic expectations, clear communication, and consistency in a benevolent, supportive atmosphere they come to learn and accept what constitutes appropriate and inappropriate behavior.

An Alliance on Behalf of the Child

For infants and toddlers to learn that their environment is ordered, predictable, dependable and eventually comprehensible, parents and caregivers need to work together on behalf of the child, supporting each other in their important relationships with infants. Family and caregiver need to share information frequently about the individual child's routines and unique behaviors as well as the smaller events that make up that child's day.

V. Qualities of a Competent Caregiver for Infants and Toddlers

The competent caregiver for infants and toddlers must know about physical, social, emotional and cognitive development in the first three years of life and the importance of an environment that fosters all of these aspects of development. An ability to protect children from injury, prevent infectious disease, and manage minor illness is essential. In addition, a caregiver should be able to form genuinely affectionate attachments with children, and to appreciate and care for each child as an individual. Sufficient health, energy and resourcefulness to enjoy and guide the abundant energy of infants and toddlers are needed as well.

It is unfortunate that individuals with these considerable skills and personal qualities face not only the low wages prevalent throughout the child care field but, in some center-based programs, are paid even less than workers caring for older children.

Lack of professional recognition and isolation are additional problems which may result in high staff turnover among both family and center-based caregivers for infants and toddlers.

VI. Measures of Quality

The National Day Care Study published in 1979 found that infants and toddlers (as well as older children) were likely to be getting care that fostered their healthy development if several factors were present in their caregiving situation.⁷ The factors can be measured, and monitored and used as the basis for governmental regulations, and/or parental choice. In 1980, the Department of Health, Education and Welfare promulgated regulations which were based on these criteria.⁸ Although Congressional action prevented the implementation of these regulations, child care experts agree on the continuing validity of the regulations as measures of child care quality. These factors include

- Staff-child ratios—A single staff member should be responsible for no more than three children under two, or four children between the ages of two and three years.
- Group size—Small groups are important for the healthy development of very young children. Infants and toddlers under two should be in groups no larger than six (with two adults); two-year-olds require groups no larger than eight (with two adults).
- Trained providers—Children cared for by adults with training in child development show higher levels of cognitive and social competence than those children cared for by adults without specialized training.

VII. Regulating Quality

A. Center-Based Care

Despite the agreement of child care researchers and child development specialists that child care quality can be observed and measured and their warnings that substandard "care" may be damaging hundreds of thousands of vulnerable young children, most of the day care arrangements where infants and toddlers spend their time are neither licensed nor systematically monitored.

The Department of Health and Human Services' 1981 Comparative Licensing Study revealed many shortcomings in state child care regulations.⁹ Thirteen states required no prior child care experience for working with children and thirteen states required no education training or background. Several states allowed staff-

child ratios of 1:8 or 1:10 for infants. Most states had no requirements regarding group size. Only 21 states had any requirements concerning developmentally appropriate program activities, and many of these requirements showed no way to operationalize the developmental program they mandated. In fact, ten states had no special regulations for infant care.

Unfortunately, there is no clear evidence that things have improved since 1981. The Model Child Standards Act—Guidance to States, prepared by the Department of HHS in January 1985, to offer states guidelines in establishing appropriate child care regulations and licensing requirements, provided an update on the status of state licensing practices.¹⁰ The document reports that the Department's review of day care standards in effect in 1984 found that staff-child ratios for day care centers have not changed significantly since 1981.

Even the regulations that do exist may be inadequately enforced or monitored; several states have responded to budget cuts by reducing their inspection programs.

B. Family Day Care

While family day care appears to be the out-of-home child care choice for many parents of very young children, only about 25% of the estimated total number of family day care providers for infants and toddlers are licensed. According to the Comparative Licensing Study, as of 1981, 29 states had no experience requirements for family day care providers. Six states did not regulate family day care at all.¹¹

Child care specialists and the growing number of associations of family day care providers point out that family day care can offer a home-like setting which accommodates the natural activities of children and adults, small group size, flexible hours, the consistency of a single caregiver, and proximity to a child's own home, at a cost which may be less than half of center-based care. The quality of unlicensed homes, however, is likely to range from excellent to extremely inadequate. At present, there are no means to assess where homes lie along that spectrum, nor how the infants and toddlers in unlicensed family day care are faring.

C. Training for Infant and Toddler Child Care Providers

Although child development training for providers is recognized, along with staff-child ratios and group size, as an essential ingredient in high quality care for infants and toddlers, federal support for child care training has been reduced in recent years and virtually none of what exists is earmarked for training with infants and toddlers. The Child Development Associate National Credentialing Program, a competency-based assessment and credentialing system recently expanded to include caregivers for infants and toddlers, is designed to provide a credential, not training. Few programs of any kind are available to train child care providers in the special skills needed for infant and toddler care. Even rarer are programs that are accessible to providers who have heavy work and family responsibilities and limited time or funds for training.

VIII. The Dilemma: High Quality Means High Costs in Infant and Toddler Day Care

Whether infants and toddlers are cared for in centers or in family day care homes, the small number of infants who can be cared for by one adult makes their care substantially more costly than that of older children. Center-based infant care typically costs well over \$100 per week. In affluent communities, family day care providers may charge similar fees to care for infants, but in most areas, providers' fees reflect what parents can afford, with the result that many providers' hourly earnings amount to less than the minimum wage.¹² Since licensed family day care providers who care for infants must reduce the overall number of children in their home, their financial situation can be particularly precarious.

With parents of infants and toddlers often near the lowest point of their earning potential, with providers' low incomes unwillingly subsidizing the cost of care, and with inadequate support for child care available from federal and state government, the financing of child care is a basic factor in the crisis faced individually by so many families.

Summary: Current Status

Working parents in dramatically increasing numbers are seeking out-of-home child care for their infants and toddlers. In the face of this growing demand, the need for an adequate supply of high quality, affordable infant and toddler child care becomes ever more critical. But without private or public resources available to supplement the cost to the consumer, families are often forced to make do with shifting, inadequate and stressful arrangements. We do not know what the costs to children's development may be.

Goals and Strategies for Improving the Future

IX. Goals for a Better Infant and Toddler Child Care Policy

Parents, providers, advocates, and policymakers—all wishing to foster the healthy development of our country's youngest children, all seeking to create opportunities for better care for babies and for richer family life—need to work together toward some fundamental goals. We need to

1. Increase the options for parental leave in the earliest months of life.
2. Expand the availability of child care for infants and toddlers.
3. Increase the affordability of child care for infants and toddlers.
4. Improve the quality of child care for infants and toddlers.
5. Promote training and professional recognition of infant and toddler child care providers.
6. Encourage consumer awareness in the selection and monitoring of infant and toddler care and continuing involvement between parents and child care providers.
7. Support adequate data collection, at the national level, on child care demand, supply, and costs.

X. Strategies for Implementing These Goals

In order to remedy the current crisis in infant care, new partnerships must be built between the public and private sectors; between federal, state and local governments; between communities and caregivers; and between parents and providers.

A. Federal Action

The federal government has unique resources and capacities to use existing programs and new initiatives to expand child care opportunities for families with infants and toddlers.

1. Restoring, Maintaining and Expanding Existing Programs. The Title XX Social Services Block Grant, The Child Care Food Program and The Dependent Care Tax Credit are three federal programs that provide general support to parents and caregivers of children in day care. While the programs do not have a specific earmark or special benefit for infant care, their expansion and support would directly benefit parents and caregivers of infants.

a. Title XX Social Services Block Grant

Title XX helps to offset the high cost of child care for low and moderate income working families. Federal support for the program was cut by more than 20% in Fiscal Year (FY) 82. Combined federal and state spending for child care from 1981 through 1983 dropped by more than 14%.¹³

b. Child Care Food Program

The Child Care Food Program (CCFP) is the single largest federal support for family day care. More than one million children in day care homes and centers participate in the program on a daily basis. In family day care, the program provides information and training to more than 80,000 enrolled licensed providers and is administered nationwide by over 700 non-profit sponsoring organizations serving more than 300,000 children. In addition to reimbursing caregivers for food served to children, CCFP provides outreach, training and monitoring. Since all programs participating in CCFP must be registered, the program is an important incentive for becoming regulated. Cuts in the program in FY 82 reduced overall support by nearly 30%. Placing a stringent means test on the family day care portion, a proposal which could eliminate thousands of low income children and providers, has been repeatedly considered.

c. Dependent Care Tax Credit

The Dependent Care Tax Credit provides a tax credit to working parents for part of their dependent care expenditures. The FY 84

tax system put \$2.5 billion into dependent care of all forms. This represents the largest single source of federal support for child care. Because the credit is based on a sliding scale which does not permit a refund to parents with limited or no tax liability, this mechanism provides little relief to poor working families whose child care costs may represent a considerable fraction of their budget. The tax credit also fails to recognize that some forms of dependent care, including care for infants and toddlers, are particularly costly.

2. Supporting New Legislative Initiatives. Because existing programs provide no special supports for infant care and are themselves inadequate for the size and scope of the problem, new federal initiatives are critically needed to address the current crisis in infant care. The federal government should take the lead to

- a. Develop methods of support for parental leave policies that make this a realistic option for families regardless of income or type of employment;
- b. Fund the development of caregiver training and other important resources for infant and toddler care;
- c. Support the development of provider networks and child care resource and referral services which serve both parents and providers by offering consumer education, training and outreach programs and which promote higher standards of quality in infant and toddler care;
- d. Support credentialing and assessment programs, such as the Child Development Associate competency-based credential, which promote the professional development of infant caregivers;
- e. Provide incentives to employers to design and support high quality infant and toddler day care programs;
- f. Support community efforts to develop and expand infant and toddler care programs for special needs children and special populations of caregivers, including
 - child care for sick infants
 - programs for infants with disabilities
 - support services for non-English-speaking providers
 - abused and neglected children
- g. Increase child care services for
 - infants of teen mothers
 - infants of women in educational, vocational or other types of training programs;
- h. Promote technical assistance at the federal level on child care

regulation, taxes, zoning and other important policy issues that relate to infant day care.

- i. Provide funds for research on infant and toddler child care.

B. State and Local Action

State and local efforts in both public and private sectors require the combined support of employers, parents, policymakers, child care providers, and professionals from a wide range of disciplines in order to achieve high quality, accessible and affordable care for infants and toddlers. Expanding existing child care services, supporting new programs that are likely to enhance the quality of care, and providing new options for working parents of infants and toddlers are important goals for communities and state systems.

1. *Ways to Expand Existing Child Care Services*

- a. Study the supply of and demand for infant and toddler care in the state in order to develop effective, targeted strategies for expanding and improving services where needed;
- b. Target state funds to supplement the Title XX Social Services Block Grant for infant and toddler care;
- c. Provide higher rates of reimbursement to day care providers for infant care, including family day care;
- d. Provide state tax credits to employers for start-up funding and other contributions to infant and toddler care.

2. *Ways to Support Programs That Enhance the Quality of Care*

- a. Establish a special fund for training infant and toddler caregivers, supported by a surcharge on birth certificates or other means;
- b. Ensure that an adequate share of Title XX funds is targeted to training infant and toddler providers;
- c. Support public/private/voluntary networks of family day care providers linked to center-based programs which can provide vacation care, care for sick children, toy libraries and other services needed by infant and toddler caregivers;
- d. Support community-oriented child care resource and referral services to recruit new providers, administer financial assistance to parents, collect data on child care supply and demand and participate in provider training and public education efforts;
- e. Work to improve the state regulations concerning infant and toddler care in centers and family day care, recognizing the need to provide incentives rather than disincentives, for family day care providers to become licensed.

3. *Ways to Provide Support to Working Parents*

- a. Establish public and private paid leave programs to cover the period of disability related to pregnancy and childbirth and to further allow parents a period of leave to care for their new infants or newly adopted children;
- b. Encourage employers to allow parents to arrange flexible work schedules;
- c. Establish a consumer awareness program to assist parents of infants and toddlers in the selection and monitoring of child care arrangements;
- d. Enact or improve state dependent care tax credits to include refundability or, at a minimum, to conform to the federal model.

Conclusion

A crisis represents not only danger but an opportunity for constructive action and creative change. Millions of working parents of infants and toddlers are struggling to find accessible, affordable care that will foster their children's healthy development. Dedicated providers of child care are searching for ways to use their talents on behalf of very young children while earning a decent livelihood for themselves and their own families.

Infants and toddlers cannot stop growing while they wait for a more nurturing world. Every day, every month in the life of a small child presents an opportunity for healthy development which can be used—or wasted. Parents and child care providers need the support of employers, communities and government if they are to assure our nation's youngest citizens the care they need and deserve.

References

1. The figures reported in this section are from the U.S. Department of Labor, Bureau of Labor Statistics, *Monthly Labor Review* (December 1984), pp. 31-34.
2. *Ibid.*, p. 31.
3. U.S. Department of Commerce, Bureau of the Census, Current Population Reports Special Studies Series P-23, No. 129: *Child Care Arrangements of Working Mothers: June 1982*, p. 18.
4. *Ibid.*, p. 8.
5. *Ibid.*, pp. 22-23.
6. One must also realize that this country currently has no data base that provides comprehensive, reliable information about child care supply, demand or trends on a regular, up-to-date basis.
7. Ruopp, R., Travers, J., Glantz, F. and Coelen, C., *Final Report of the National Day Care Study. Vol. 1. Children at the Center: Summary Findings and Their Implications*, Cambridge, MA, Abt Associates, 1979.
8. U.S. Department of Health, Education and Welfare. "HEW Day Care Regulations." *Federal Register* 45, no. 55, March 19, 1980.
9. U.S. Department of Health and Human Services, *Summary Report of the Assessment of Current State Practices in Title XX Funded Day Care Programs: Report to Congress*, Washington, DC, 1981. DHHS Publication No. (OHDS) 81-30331.
10. U.S. Department of Health and Human Services, Office of Human Development Services, "Model Child Care Standards Act—A Guidance to States to Prevent Child Abuse in Day Care Facilities," January 1985, a report mandated by the U.S. Congress in PL 98-473.
11. U.S. Department of Health and Human Services, *Comparative Licensing Study. Profiles of State Day Care Licensing Requirements. Family Day Care Homes*, Vol. 5, Washington, DC, 1982.
12. U.S. Department of Health and Human Services, Office of Human Development Services, *Family Day Care in the United States: Summary of Findings (Final Report of National Day Care Home Study: Vol. 1)*, p. 98.
13. Children's Defense Fund, *Child Care: The States' Response. A Survey of State Child Care Policies, 1983-1984*, Washington, DC, Children's Defense Fund, 1982.

Millions of working parents of infants and toddlers are struggling to find accessible, affordable care that will foster their children's healthy development. Dedicated providers of child care are searching for ways to use their talents on behalf of very young children while earning a decent livelihood for themselves and their own families.

This publication of the Ad Hoc Day Care Coalition outlines the dimensions of what has become a crisis in infant and toddler care; it then suggests directions for action by employers, communities and government to assure our nation's youngest citizens the care they need and deserve.